## THE ARIZONA CENTENNIAL NETWORK

	e complete and return this form via fax <u>chard@azot.gov</u> , or visit <u>www.arizona</u> 1			f this	form, contac	t
LEAD	ORGANIZATION NAME					
CONT	ACT NAME AND TITLE					
STRE	ET ADDRESS, CITY, ZIP					
PHON	E/EMAIL					
	Yes! I want to receive official Arizona	Cente	ennial communications.			
ORGA	NIZATION TYPE					
	ARIZONA POLITICAL SUBDIVISION (County, City, School District) TRIBAL GOVERNMENT BUSINESS INSITUTION/CORPORATION)		CHARITABLE NON-PROFIT ORGANIZATIO CHARITABLE FOUNDATION CIVIC OR FEDERAL ORGANIZATION COLLEGE OR UNIVERSITY	V (501	(c)3)	K-12 SCHOOL  PUBLIC  PRIVATE  CHARTER  OTHER:
DOES	YOUR ORGANIZATION HAVE PLANS FC	R TH	IE ARIZONA CENTENNIAL?			
□ N	ot at this time   Plans are in progre	SS	☐ We have determined an event ☐	We	have determine	ned a project
IF APP	LICABLE: COLLABORATING ORGANIZA	TION	(S)			
ACTIVI	TY TITLE AND PROJECTED DAY(S), MO	NTH(	(S), YEAR			
			· /·			
	ITY TYPE (CHECK ALL THAT APPLY)  CONFERENCE EXHIBIT IN-OR-AFTER SCHOOL PROGRAM SYMPOSIURM/ SEMINAR/ LECTURE		MEDIA (RADIO/TV, FILM, WEB) PERFORMANCE PUBLICATION PUBLIC ART PROJECT			
_	RIPTION DESCRIBE YOUR PROJECT OR EV	_		_		
FUND	<b>ING</b> HOW DO YOU INTEND TO FUND THE PF	ROJEC	CT OR EVENT?			
QUEST	TION HOW MAY THE ARIZONA CENTENNIAL ENDORSEMENT MARKETING/PROMOTION	COMI	MISSION HELP TO MAKE YOUR PROJECT S FUNDING IDENTIFY PARTNERS / PARTICIPANTS	JCCES	SSFUL? (CHEC PUBLIC RELA WEB SITE PR	ATIONS